

**BETHESDA BRAC IMPROVEMENTS**  
**MD 355 (ROCKVILLE PIKE) AND JONES BRIDGE ROAD/CENTER DRIVE**

**A \$4,300,000 Grant Proposal to the Office of Economic Adjustment,  
U.S. Department of Defense**

**Submitted by the Maryland State Highway Administration, Maryland, Department of  
Transportation**

**October 7, 2011**

***RE: Federal Register Document 2011-184000: Volume 70, Number 140, July 21, 2011  
Notice of Federal Funding Opportunity (FFO) for construction of Transportation Infrastructure  
Improvements Associated with medical facilities related to recommendations of the 2005  
Defense Base Closure and Realignment Commission.***

**A. POINT OF CONTACT:**

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**B. EXISTING OR PROJECTED TRANSPORTATION INFRASTRUCTURE ISSUE:**

- **Relocation of Walter Reed**

The Bethesda Base Realignment and Closure (BRAC) improvement projects are intended to mitigate gridlock, improve pedestrian access and safety, and support multi-modal transportation systems around the new federally-mandated Walter Reed National Military Medical Center. One of the most noteworthy moves mandated by the 2005 BRAC law was the closure of the Walter Reed Army Medical Center (WRAMC) in Washington, D.C., with the relocation of most of its functions and personnel to the campus of the National Naval Medical Center (NNMC) in Bethesda, Montgomery County, Maryland, establishing the joint service Walter Reed National Military Medical Center (WRNMMC). The intent of consolidating these two premier institutions was to establish the modern “crown jewel” of military medical care and research combining the best of Army, Navy and Air Force practices that could serve the needs of the American military facing new kinds of catastrophic injuries in the era following September 11, 2001.

The BRAC expansion will add 2,500 personnel to the 8,000 currently stationed at NNMCMC, and the hospital visitor load will double to almost 1,000,000 visits annually. The road network around NNMCMC is already at capacity and is at Level of Service (LOS) F – or failing, in common vernacular. If left unmitigated, this growth will create untenable gridlock – where the true Level of Service cannot even be measured beyond “F” -- that would negatively affect the ability of wounded warriors, doctors and emergency personnel to access the campus on a timely basis.

- **Impacts of BRAC on Bethesda’s Urban Transportation Infrastructure**

Bethesda is located in Montgomery County, MD which has a total population approaching 1,000,000. Bethesda is in the heart of the National Capital Region and draws employees and visitors to its thriving commercial district from across the Washington-Baltimore Metropolitan area of over 8,000,000 people. The area of Bethesda that is impacted by BRAC is a densely populated and highly developed community inside the Capital Beltway with approximately 56,000 residents and an employment base of 70,000. Bethesda has long-established residential neighborhoods and a thriving commercial district. Along with NNMCMC, the BRAC-impacted area of Bethesda is home to the National Institutes of Health (NIH) which is the largest employer in Montgomery County with over 18,000 on-campus personnel, and Suburban-Johns Hopkins Hospital which is the region’s designated trauma center. The NNMCMC, NIH and Suburban collaborate as the Bethesda Hospitals Emergency Preparedness Partnership.

Suburban-Johns Hopkins Hospital employs over 1,400 people, and has more than 13,000 admissions per year. The hospital also supports more than 40,000 emergency room visits and 90,000 outpatient visits per year.

The NNMCMC is directly across from the NIH campus and currently employs 8,000 personnel. The hospital at NNMCMC receives approximately 500,000 visits per year. By September 2011, BRAC will increase personnel at NNMCMC by almost one-third to 10,200, and will double the Medical Center’s visitor load to approximately 1,000,000 per year. Despite Montgomery County’s sophisticated planning and projection process, the County did not anticipate this rapid level of growth. In most BRAC growth communities, roadway improvements are a common solution to BRAC-related increases in traffic.

The 2005 BRAC law committed billions of dollars to fund BRAC-related construction on the campuses of affected installations, but did not commit funds to help communities improve their transportation infrastructure to meet dramatic and rapid growth due to BRAC. The NNMCMC was able to identify specific impacts of BRAC growth at NNMCMC on Bethesda’s transportation network in its March 2008 Environmental Impact Statement (EIS): *For Activities to Implement 2005 Base Realignment and Closure Actions At National Naval Medical Center Bethesda, Maryland*. In short, the major roadways and intersections that

serve NNMC are already at or approaching LOS F; the BRAC growth would make failing traffic even worse.

The transportation analysis that was part of the EIS identified that all four of the SHA intersections will operate above capacity during peak periods. Most other BRAC growth occurs in areas that are removed from urban population centers, and transportation solutions tend to call for additional highway capacity. However, NNMC's location in a settled and densely populated urban area dictates a combination of approaches. Potential traffic mitigations were identified that focus on roadway, transit, and pedestrian improvements.

- **Necessity of Federal Assistance for Project Completion**

Mitigating BRAC-related congestion will require a multi-modal approach to improve traffic and pedestrian movement and to increase the use of mass transit and other alternative means of transportation. The State of Maryland and Montgomery County are working aggressively to mitigate congestion caused by BRAC consolidation in Bethesda, but it is readily evident that neither the State nor the County has sufficient resources to implement all that is necessary.

This FFO proposal relates to a Maryland State Highway Administration (SHA) project to provide multi-modal highway transportation improvements within a highly urbanized roadway network surrounding NNMC that is already plagued with regular congestion. It is important to note that this project is just one of several designed by the State and County Departments of Transportation to mitigate BRAC-related congestion.

The five major SHA improvement projects, in order of priority are:

1. MD 355 (Rockville Pike) and West Cedar Lane / Cedar Lane;
2. MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway;
3. MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue;
4. Bethesda Trolley Trail Connections And Passenger Drop-Off Loop, and;
5. MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive.

This project, if funded, would be most effective if all the related projects being submitted by Montgomery County and the State of Maryland are funded. The full program of projects is the result of extensive collaboration with local, state and federal stakeholders in the BRAC actions at NNMC. Priority projects identified by stakeholders have been designed to complement each other, and collectively serve to foster an overall network that meets the considerable transportation challenges associated with BRAC actions in Bethesda. In total, the program will improve traffic operations, promote the use of alternative transportation including mass transit and bicycle and pedestrian facilities, and reduce the use of single occupancy vehicles and the demand for parking at the new Walter Reed National Military Medical Center. These projects, along with improvements to bicycle and pedestrian

facilities already undertaken by Montgomery County, will ensure greater access to WRNMMC for its patients and staff. But for funding from this Office of Economic Adjustment (OEA) Federal Funding Opportunity, these projects cannot be completed.

- **Support from the Defense Department**

The Department of Defense supports these projects and has committed \$28.174 million through the Defense Access Roads program for implementation of the Maryland Route 355 Multimodal Crossing Project. The Navy has made very clear its support for the BRAC projects in development (please see Attachment A, a letter from Captain M. P. Malanoski and Rear Admiral A. L. Stocks), and recognizes the role that they stand to play in addressing the traffic considerations raised in the March 2008 EIS.

Additionally, the Department of Defense, through OEA, has demonstrated support of mitigation projects underway by providing \$450,000 to support design of the SHA intersection improvement program at NNMCM.

- **Road Improvements**

Many visitors and commuters to the military medical campus will arrive by car. The major roads serving NNMCM are mainly state highways. Capacity cannot be increased in this densely developed region without unacceptable community disruption, but relatively low-impact improvements can help facilitate increased traffic flow.

The SHA is engaged in intersection improvement projects that are supported by NNMCM's March 2008 EIS, and SHA anticipates maintaining the same or slightly improved LOS, even with increases of BRAC-related traffic. The SHA is coordinating these projects with traffic flow improvements the NNMCM is planning at its gates on MD 355 (Rockville Pike) and Jones Bridge Road. The SHA projects will also include upgrades to adjoining bicycle and pedestrian paths to accommodate those modes of urban commuting.

When all improvements are constructed, significant benefits will be provided to the entire transportation network. Based on analysis conducted using Synchro traffic simulation software, the intersection improvements are projected to reduce fuel consumption in the study area by approximately 1,300 gallons each day during the peak hours compared to the No-Build condition. Considering an average gas price of \$3.75 per gallon, that equates to a user cost savings of over \$3 million per year in fuel cost alone. Additionally, the proposed intersection improvements are projected to reduce emissions of carbon monoxide (CO), nitrogen oxides (NOx), and volatile oxygen compounds (VOC) by 43% during the AM peak hour and by 28% during the PM peak hour compared to the No-Build condition.

The SHA is submitting proposals to OEA for each BRAC improvement project listed above, and the locations can be seen in Figure 1.

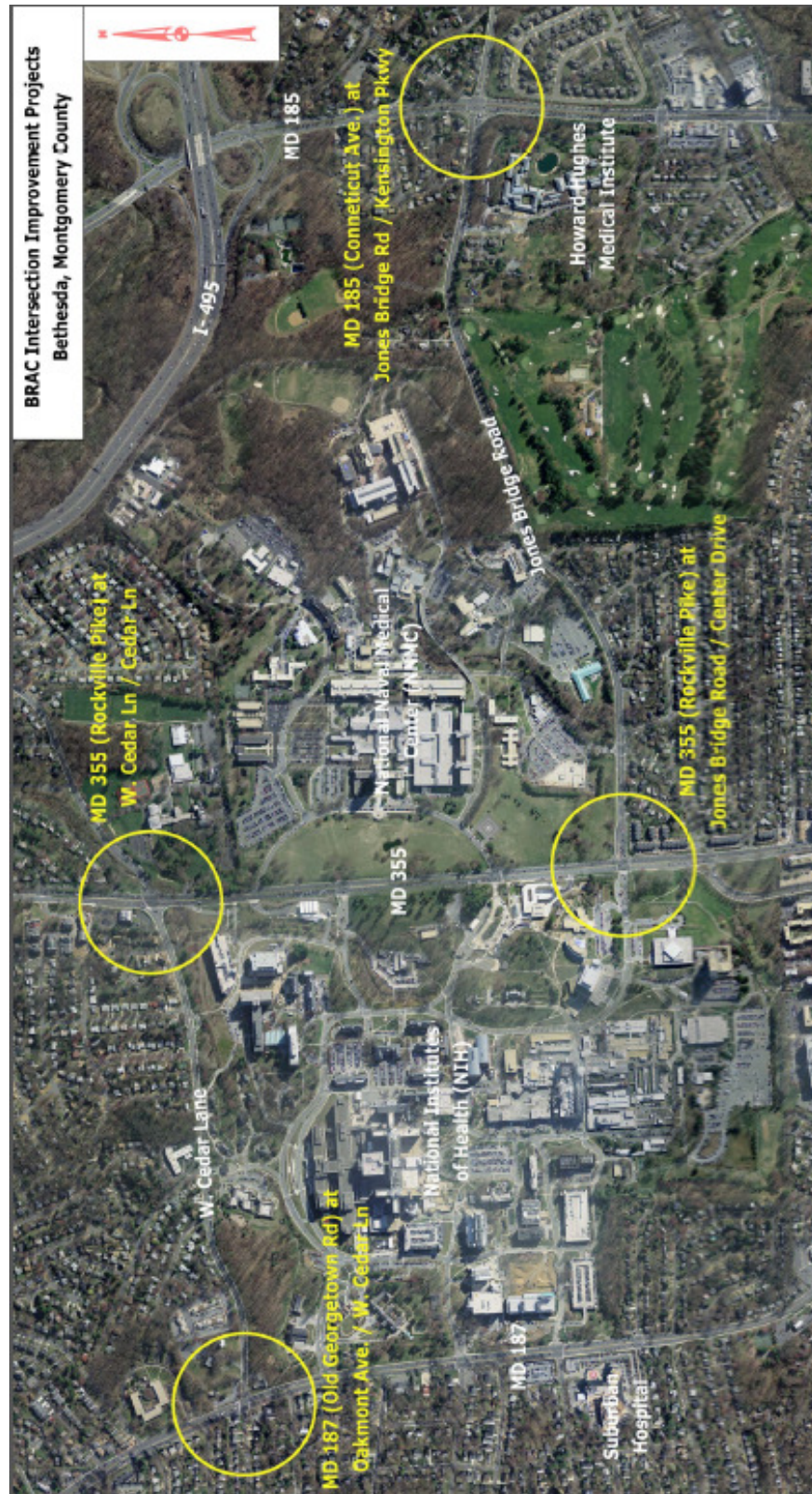


Figure 1: BRAC Improvement Locations

- **Bicycle and Pedestrian Improvements**

BRAC-related growth requires that the State and County's robust bicycle and pedestrian trail network be improved. The SHA and the Montgomery County Department of Transportation (MCDOT) hope to encourage an increase in bicycle commuters and ridership, by connecting existing bike paths and sidewalks with new and expanded paths around NNMCMC. The NNMCMC campus is directly across from the campus of NIH, the world's supreme medical research institution and the largest employer in Montgomery County. Today, NIH has an active bicycle commuter club with over 700 members; NNMCMC will emulate this program as part of its BRAC-related Transportation Management Plan.

- **Commuter Bus Improvements**

State, county, and regional transportation authorities including the Washington Metropolitan Area Transit Authority (WMATA) are working with NNMCMC and NIH to study ways to expand existing bus transit service to accommodate BRAC growth at NNMCMC and expected long-term growth at NIH. This may include expanding or realigning existing routes or establishing new routes utilizing outlying park-and-ride commuter lots. In addition, NNMCMC and NIH are collaborating to provide commercial commuter bus service from numerous points in the Washington-Baltimore region for their personnel.

**C. PROJECT DESCRIPTION:**

This Grant proposal, if accepted by OEA, would provide \$4.3 million for the intersection improvements at MD 355 (Rockville Pike) and Jones Bridge Road/Center Drive. This intersection is the fifth prioritized project near the NNMCMC in need of improvements to mitigate for additional traffic demand due to BRAC consolidations. The existing intersection currently operates over capacity, with a vehicle delay of 57.4 sec/vehicle during the AM peak hour and 104.8 sec/vehicle during the PM peak hour, which makes it complicated to accommodate additional personnel without substantial infrastructure improvements.

The purpose of the project is to improve the capacity and operation of the intersection to support the mission of the new Walter Reed National Military Medical Center. Westbound Jones Bridge Road will have modified lane configurations to provide a double left onto southbound MD 355. Eastbound Center Drive will be widened to the south to provide an exclusive left-turn lane onto northbound MD 355. A dynamic Lane control will be implemented, in a lead contract for the MD 355 (Rockville Pike) and Cedar Lane proposal, on southbound MD 355, between South Wood Road/South Drive and Jones Bridge Road/Center Drive, changing a lane usage from a through lane to a left turn lane, in the PM peak only.

## MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive

If all these intersection improvements are completed, including the dynamic lane control, the capacity at MD 355 and Jones Bridge Road will increase 2% in the AM peak hour, and 22% in the PM peak hour.

Pedestrian safety and transit access are also important features in the scope. The westbound ramp from MD 355 to Woodmont Avenue will have a radius reduction, which aims to have vehicles slow down at the pedestrian crossing. The intersections and sidewalks within the project limits will be upgraded to comply with the Americans with Disabilities Act (ADA). Green buffer will be provided between sidewalks and curb wherever feasible to improve pedestrian safety by keeping pedestrians away from large volumes of fast moving vehicles and plowed snow in the winter. The MD 355 pedestrian crossing at Jones Bridge Road and Center Drive will be relocated to the north leg of the intersection, to avoid conflicts between pedestrians and the proposed double left from Jones Bridge Road. Also, the crosswalk relocation will provide connectivity to the hiker/biker trail network in the area. The right-turn island in the westbound Jones Bridge Road will be removed to enhance pedestrian safety when crossing. The existing hiker/biker path will be improved along southbound MD 355 from South Drive to Woodmont Avenue, to a consistent ten foot wide trail. Other improvements include reconstruction of traffic signals and drainage improvements.

These proposed improvements are projected to reduce vehicle delay by 29% during the AM peak period to 41 sec/vehicle and by 53% during the PM peak period to 49.2 sec/ vehicle.

**Table 1: Delay Time & Percent Reduction**

MD 355 at Jones Bridge Road		2011 No Build	Dynamic Lane Control		Intersection Improvements		Full Build	
		Delay	Delay	Reduction	Delay	Reduction	Delay	Reduction
Peak Hour	AM	57.4 s	57.4 s	0%	41.0 s	29%	41.0 s	29%
	PM	104.8 s	51.8 s	51%	49.2 s	3%	49.2 s	53%

*Note 1: Phases are sequential. Delay times reflect phases being constructed in order, not individually.*

*Note 2: Full build delay is compared to no build delay.*

### D. PROJECT ENGINEERING INFORMATION:

During the Preliminary Engineering Design stage, SHA reduced the project scope to minimize the impacts to adjacent residential properties and environmental resources. The measures that have been taken by SHA to reduce impacts include use of narrow lane widths, tightening intersection geometrics, and evaluation of various lane configurations to reduce the typical section adjustments.

As part of the original scope of work, widening to provide an additional lane in the southbound MD 355 direction was considered to alleviate the traffic congestion. However, after meetings and discussions between SHA and local stakeholders, SHA proposed a

dynamic lane control to avoid this considerable impact to the community and facilities in the surrounding area. This dynamic Lane control will change a lane usage, from a through lane to a left turn lane, toward eastbound Jones Bridge Road, in the PM peak only. This eliminates the additional lane that was proposed in the original scope. Since its cost and benefit to the traffic delays are very attractive, SHA decided to accelerate the construction of the dynamic lane control. That project is included in the MD 355 (Rockville Pike) at Cedar Lane proposal.

For the current scope of work, it is proposed to permanently change the lane usage in the westbound Jones Bridge Road direction, from a shared through/left turn lane to a left turn lane, and add a lane to eastbound Center Drive for an exclusive right turn. The sidewalk on eastbound Jones Bridge Road was designed in such a way that no utilities will be impacted. In addition, considerations to minimize utility impacts are present throughout the project, such as the alignment for the hiker/biker path along southbound MD 355 between Center Drive and Woodmont Avenue; ADA ramp locations at the MD 355 and South Wood Road/South Drive intersection; and the seat walls' alignment/location on the NIH property. These changes have decreased the cost of the full build construction and increased the technical feasibility of the project, which is depicted in a rendering of the project's footprint in Figure 2.



MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive

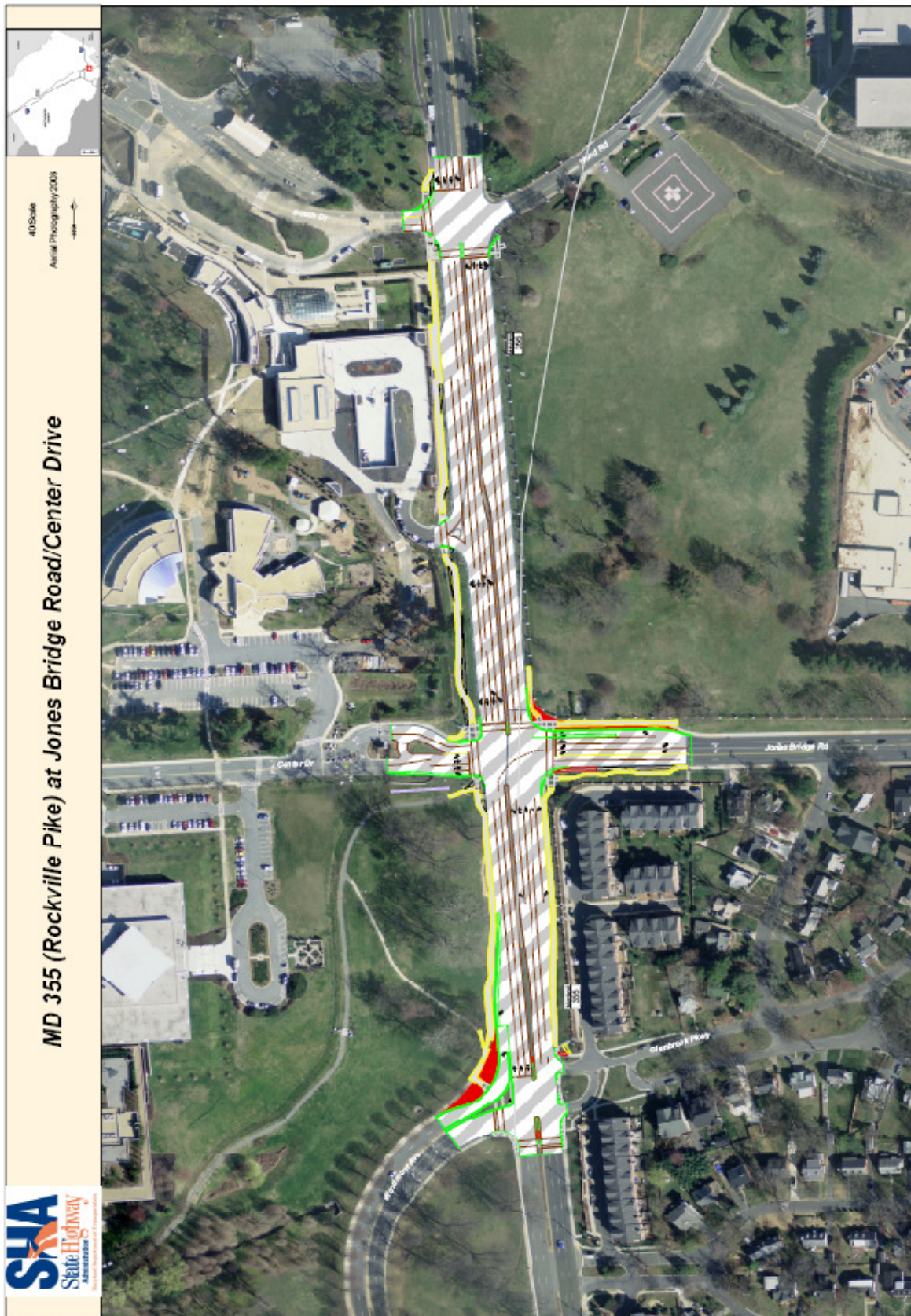


Figure 2: MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive

**E. PROJECT PARTIES:**

- The following stakeholders were directly involved in the project development process:
  - Maryland Department of Transportation (MDOT)
  - Maryland State Highway Administration (SHA)
  - Montgomery County Department of Transportation (MCDOT)
  - Federal Highway Administration (FHWA)
  - Maryland Transit Administration
  - Washington Metropolitan Area Transit Authority (WMATA)
  - Naval Support Activity-Bethesda
  - National Institutes of Health (NIH)
  - Maryland-National Capital Park and Planning Commission
  - National Capital Planning Commission
  - Glenbrook Village Home Owners Association
  - Bethesda Urban Partnership, Inc.

**F. GRANT FUNDS AND OTHER SOURCES OF FUNDS:**

The SHA currently has a funding level of approximately \$44 million for all five improvement projects. The sources of funding can be seen in Table 2.

**Table 2: Current Sources of Funding**

Source	Funding
OEA	\$450,000
State	\$3,786,000
Federal	\$39,796,000
Total	\$44,032,000

**Table 3: Cost Breakdown for Each Project**

Project	Total	Funded	Unfunded
MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane	\$50.2 M	\$31.2 M	\$19.0 M
MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway	\$29.7 M	\$11.4 M	\$18.3 M
MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue	\$8.0 M	\$0.7 M	\$7.3 M
MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive	\$5.0 M	\$0.7 M	\$4.3 M
Bethesda Trolley Trail Connections And Passenger Drop-Off Loop	\$1.1 M	\$0.0 M	\$1.1 M

**Table 4: Unfunded Costs**

<b>Current Funding Level</b>	<b>\$0.7 M</b>
<b>Total Estimated Cost</b>	<b>\$5.0 M</b>
<b>Total Unfunded Costs for Proposed OEA Projects</b>	<b>\$4.3 M</b>

**G. USES OF CONSTRUCTION PROJECT FUNDS:**

- MD 355 at Jones Bridge Road / Center Drive
  - Preliminary and Final Engineering Design – \$0.7 million (funded)
  - Land Acquisition will have no cost, since it will be obtained from federal agencies
  - Construction (including Utilities) - \$4.3 million (unfunded)

*Note: Project Administration / Inspection Costs are accounted for in above bulleted items*

**H. PROJECT SCHEDULE:**

- MD 355 at Jones Bridge Road / Center Drive
  - Preliminary and Final Engineering Design Completed – 01/2011
  - National Environmental Policy Act (NEPA)- Environmental Compliance – approved – 09/19/2010
  - Land Acquisition Complete – 2 months
  - Utility Relocation Complete – 18 months
  - Construction Start – 14 months
  - Construction Complete – 26 months

*Note: All time frames are from the date funding is received*

**I. ENVIRONMENTAL APPROVALS:**

- MD 355 at Jones Bridge Road / Center Drive
  - NEPA – Category Exclusion (CE) approved – 09/19/2010
  - Storm Water Management (SWM), Erosion & Sediment (E&S) permits were submitted for approval to Maryland Department of Environment (MDE) on June 7, 2011, comments will be addressed with the Preliminary and Final Engineering Design completion.

*Note: Wetland Permit is not required for this project*

**J. STATE AND LOCAL PLANNING:**

- Transportation Improvement Program (TIP)

The National Capital Region Transportation Planning Board (TPB) is the designated Metropolitan Planning Organization for the Washington Metropolitan Area. The TPB approved the 2011-2016 TIP, a 6-year financial program that describes the schedule for obligating federal funds to state and local projects, on November 12, 2010. The TIP contains funding information for all modes of transportation in Suburban Maryland, Northern Virginia, and the District of Columbia to include highways with High Occupancy Vehicles as well as transit capital and operating costs.

The TPB conducted a public comment period and a public forum on October 14, 2010 to go over the projects in the 2011-2016 TIP. The Air Quality Conformity Determination for the FY 2011-2016 TIP demonstrates that all required emissions tests are being met and conforms to all requirements of the Clean Air Act Amendments of 1990.

The Bethesda BRAC intersection improvement projects appear in the Suburban Maryland portion under the SHA tab of the 2011 TIP, specifically page M-2, line 2. At this time, the description includes, as one line item, all four major intersections of the SHA Intersection Improvement project listed in Section B. However, as additional phases of these projects get funded, they will get split up accordingly and amended into the TIP as individual projects. The latest draft of the MDOT Consolidated Transportation Program (CTP) has MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane and MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway listed as separate projects, since a portion of them are funded. In addition to the intersection projects, SHA will also be constructing as a separate project, a hiker/biker trail that provides a direct link between Bethesda and Rockville, Maryland, which will also be amended into the TIP as a stand alone project.

- Statewide Transportation Improvement Program (STIP)

The Fiscal Year 2011 Maryland STIP is a four-year, fiscally constrained, and prioritized set of transportation projects, compiled from statewide, local, and regional plans. In the case of the Bethesda BRAC intersection improvement projects, the STIP includes the approved 2011 TIP from the Washington Region.

A key component of the STIP process is the Annual Consultation Process, known as the Fall Tour, which is a process stipulated by State law requiring the Secretary of Transportation to visit with, and present to each of the State's county jurisdictions the annual draft of Maryland's six-year capital investment program known as the CTP. The Bethesda BRAC intersection improvement projects have been formally presented in the CTP since 2008.

Maryland's 2011 STIP, which has been approved by FHWA, includes the Bethesda BRAC intersection improvement projects because it is listed in the 2011 TIP for the Washington Region.

**K. GRANTS MANAGEMENT:**

The SHA successfully administers over \$600 million each year in federal funding which is made up of formula apportionments, allocated program funds, discretionary program funds (either Congressionally designated or awarded by FHWA), and other special federal funding, (e.g., Department of Defense OEA grants).

The Federal-aid Highway Program is a reimbursable program, and has been since the early part of the 20<sup>th</sup> Century. That means the Federal Government only reimburses States for costs actually incurred - in contrast to a pre-paid grant program. Projects are put under agreement with FHWA (approved), work is started with State dollars and then FHWA is invoiced for payment of pre-approved amounts.

Approximately 46% of the 2011-2016 MDOT CTP Capital Program (\$9.5 billion) is administered by SHA.

Two excellent examples of SHA's ability to oversee and deliver projects on time and on budget are the Woodrow Wilson Bridge (WWB) and the Intercounty Connector (ICC).

- Woodrow Wilson Bridge (WWB)

In October 2008 Maryland, along with Virginia, was awarded the 2008 *America's Transportation Award* Grand Prize by the American Association of State Highway and Transportation Officials (AASHTO). The WWB was selected for being on-time, on budget and most importantly for its innovative management in areas of the environment, safety, construction management and financial planning. It was called a "premier example of innovative management," for its collaborative efforts to keep this \$2.47 billion project on time and on budget while coordinating four sponsoring agencies: FHWA, SHA, Virginia Department of Transportation (VDOT), and the District of Columbia Department of Transportation. The award included \$10,000 for Maryland to use for transportation-related educational scholarships.

- Intercounty Connector (ICC)

The ICC has been selected to receive the 2011 AASHTO *President's Transportation Award for Highways*. This \$2.56 billion mega-project was selected for the innovative management approach undertaken by the *ICC Team* to deliver one of the first three all electronic toll (AET) highways on new alignment to open in the United States. The *ICC Team* kept the project on schedule, on budget, set precedents for handling sensitive environmental areas, exceeded goals for disadvantaged business enterprise participation, and executed a successful community outreach program, all critical to the project's success. As a transportation facility more than 50 years in the making, the ICC sets a national standard for both environmental protection/stewardship and the provision of a high quality and safe AET facility.

**L. SUBMITTING OFFICIAL:**

As Acting Administrator of the Maryland State Highway Administration, appointed by the Secretary of the Maryland Department of Transportation in July of 2011, I am pleased to submit the following five grant proposals for the Office of Economic Adjustment's (OEA) consideration in connection with its grant program for transportation projects in support of Base Realignment and Closure (BRAC) consolidations at military medical facilities. The five submissions include grant proposals for OEA funding for the following five transportation improvement projects:

1. MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane;
2. MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway;
3. MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue;
4. Bethesda Trolley Trail Connections And Passenger Drop-Off Loop, and;
5. MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive.

Together with additional critical improvements in development by the Montgomery County Department of Transportation as part of its Maryland Route 355 Multimodal Crossing Project, these projects will collectively serve to help mitigate the impacts of BRAC at the newly created Walter Reed National Military Medical Center, and ensure that the transportation network at the Bethesda campus effectively supports the Installation's mission, and provides for safe, efficient travel, by automobile, bicycle, and on foot, for all members of the local community.

The priority projects detailed herein reflect the exhaustive collaboration of local, state and BRAC stakeholders in the region, and their shared commitment to developing multi-modal solutions for the transportation challenges associated with BRAC. I appreciate your consideration of our submission, and look forward to the expeditious implementation of these critical projects in the coming months and years.

Thank you again for your consideration.

Darrell B. Mobley  
Acting Administrator  
State Highway Administration  
707 North Calvert Street  
Baltimore MD 21202  
410-545-0400  
dmobley@mdot.state.md.us



MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive

**Attachment A:**

**DEPARTMENT OF THE NAVY**  
**WALTER REED NATIONAL MILITARY MEDICAL CENTER (20889-5600)**  
**NAVAL SUPPORT ACTIVITY BETHESDA (20889-5600)**  
**BETHESDA MARYLAND**

IN REPLY REFER TO

NAVSUPPACT Bethesda  
11000  
Ser N00/0174  
4 Oct 11

WRNMMC Bethesda  
11000  
Ser 00/2570  
4 Oct 11

JOINT LETTER

Mr. Darrell B. Mobley  
Acting Administrator  
State Highway Administration  
707 North Calvert Street  
Baltimore, MD 21202  
Mail Stop: C-400

Dear Mr. Mobley:

As the Commander, Walter Reed National Military Medical Center (WRNMMC) and the Commanding Officer, Naval Support Activity Bethesda (NSAB) we provide this letter for Montgomery County and Maryland officials who are seeking funding for traffic projects that impact our organizations. Montgomery County is submitting a request to fund the design and construction of a Metro Crossing project that will provide direct access to the Medical Center Metro Station from the NSAB campus for commuters and visitors using rail, bus, and car or van pools, as well as bicyclists and pedestrians. This urgently needed project will help ease and seek to prevent untenable gridlock and provide timely access to the installation by enabling thousands of personnel and visitors who come to WRNMMC and NSAB every day to use transit and other alternatives instead of driving alone.

The State of Maryland is requesting funds for four separate major intersection improvement projects that serve WRNMMC and NSAB: MD 355 at Cedar Lane; MD 185 at Jones Bridge Road; MD 187 at West Cedar Lane; and MD 355 at Jones Bridge Road. These projects will improve traffic operations and pedestrian safety at these currently failing intersections, even with the increased volume of traffic that will be drawn to WRNMMC and NSAB. Furthermore, the State of Maryland will seek to improve MD 187 (Old Georgetown Road) by expanding a regional network of paths that are used by thousands of cycling and pedestrian commuters every day.

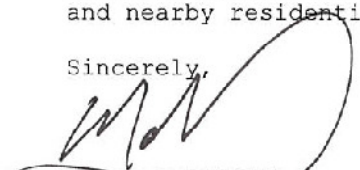


NAVSUPPACT Bethesda  
11000  
Ser N00/0174

WRNMMC Bethesda  
11000  
Ser 00/2570

Despite BRAC construction of three parking structures, there exists a parking shortfall of approximately 1,300 spaces for staff parking. Currently, a significant portion of parking in the new structures is reserved for patients and their visitors. WRNMMC is now the primary hospital that first receives all of our Nation's wounded, ill, and injured from overseas facilities. In addition, there will be a loss of approximately 750 additional parking spaces to support necessary construction. Given the lack of staff parking, there has been a significant increase in the number of staff members requiring the use of alternative modes of transportation to include mass transit, cycling, and walking. The proposed transportation infrastructure projects would provide comprehensive improvements to traffic operations while promoting pedestrian safety and greater use of these alternate modes of transportation. In addition, increased access to the existing network of bicycle and pedestrian paths will encourage greater use of alternative transportation modes and remove more vehicles from an already highly congested Medical Center area. In short, the proposed infrastructure projects would not only enable the staff at WRNMMC to successfully complete its mission, providing world-class medical care, but would also benefit the surrounding community, which includes the National Institutes of Health, the Bethesda Urban District, and nearby residential communities.

Sincerely,



M. P. MALANOSKI  
Captain, Medical Corps  
U.S. Navy  
Commanding Officer  
Naval Support Activity  
Bethesda

Sincerely,



A. L. STOCKS  
Rear Admiral, Medical Corps  
U.S. Navy  
Commander  
Walter Reed National  
Military Medical Center